# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)		PAGE 1 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) Senate Conservatives Fund		FEC IDENTIFICATION NUMBER ▼
Condito Concorvativos I and		C C00448696
Check if 24-hour report X 48-hour report New report	Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination
Mailing Address PO Box 388		01 03 2015 Amount
City State Zi	p Code	6.25
	2313-0388	Transaction ID : E140597379AA141259A3 Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Online Processing	Category/ Type	01 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	Sought: House District:
Mike Lee		President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	6.25 Disbut 2016	rsement For: X Primary General  Other (specify) ▶
Full Name of Payee Senate Conservatives Fund		Date of Public Distribution/Dissemination
Mailing Address PO Box 388		01 10 2015 Amount
City State Zi	p Code	78.50
Alexandria VA 2		Transaction ID : EEA77CF0B2EBD45B6B7: Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Online Processing	Category/ Type	01 / 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	X Support Office	Sought: House District:
Mike Lee	Oppose	President State: UT State:
Calendar Year-To-Date Per Election for Office Sought	84.75 Disbu 2016	rsement For:
(a) SUBTOTAL of Itemized Independent Expenditures	<b>&gt;</b>	84.75
(b) SUBTOTAL of Unitemized Independent Expenditures		
	•	7 7 7
(c) TOTAL Independent Expenditures	·····	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Paul Kilgore [Electronical	lly Filed] Date 03	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

Schedule E)			FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund			C C00448696
			M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report	X New re	eport Amends report f	
Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination
Mailing Address PO Box 388			01 17 7 2015
			Amount
City	State	Zip Code	13.75
Alexandria	VA	22313-0388	Transaction ID : E77AF25DBD6EC453898F Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Online Processing		Category/ Type	01 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support O	ffice Sought: House District:
Mike Lee		Oppose	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought			isbursement For:
Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination
			01 24 2015
Mailing Address PO Box 388			Amount
City	State	Zip Code	66.20
Alexandria	VA	22313-0388	Transaction ID : E0D6E4A692B6A44E4A47  Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Online Processing		Category/ Type	01 / 24 / 2015
Name of Federal Candidate		Support C	Office Sought: House District:
Mike Lee		Oppose	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought			olisbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expend	itures		79.95
•			7 7 7
(b) SUBTOTAL of Unitemized Independent Expe	enditures		7 7 7
(c) TOTAL Independent Expenditures		······	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authoriz	•	•
Paul Kilgore	[Electr	onically Filed] Date	03 17 2015
Signature	Encur	onically Filea Date	2015

Schedule E)	TOTILO	PAGE 3 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund		C C00448696
Check if 24-hour report X 48-hour report New repo	ort Amends report	filed on M = M / D = D / Y = Y = Y
Full Name of Payee		Date of Public Distribution/Dissemination
Senate Conservatives Fund		01 31 2015
Mailing Address PO Box 388		Amount
City State	Zip Code	28.75
•	22313-0388	Transaction ID : E4E72CD473970430A95C Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Online Processing	Category/ Type	01 31 2015
Name of Federal Candidate	Support (	Office Sought: House District:
Mike Lee	Oppose	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Senate Conservatives Fund		02 07 2015
Mailing Address PO Box 388		Amount
City State	Zip Code	50.75
Alexandria VA	22313-0388	Transaction ID : E5FCF8A5D42274B0FBCADate of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Online Processing	Category/ Type	02 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	X Support	Office Sought: House District:
Mike Lee	Oppose	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	244.20	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		79.50
		7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>•</b>
(c) TOTAL Independent Expenditures		<b>&gt;</b>
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Paul Kilgore [Electronic	cally Filed] Date	03 17 2015
Signature		

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund		C C00448696
		C C00440696
Check if 24-hour report X 48-hour report New report	ort Amends report file	ed on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Senate Conservatives Fund		02 14 2015
Mailing Address PO Box 388		Amount
City State	Zip Code	53.00
Alexandria VA	22313-0388	Transaction ID : E36A701313F4E449C870 Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Online Processing	Category/ Type	02 / 14 / 2015
Name of Federal Candidate	Support Office	ice Sought: House District:
Mike Lee	Oppose	President State: UT
Calendar Year-To-Date Per Election for Office Sought	297.20 Disk 2010	bursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Senate Conservatives Fund		02 21 2015
Mailing Address PO Box 388		
		Amount
City State	Zip Code	5.50
Alexandria VA	22313-0388	Transaction ID : E3C1535B43D534031989 Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Online Processing	Category/ Type	02 / 21 / 2015
Name of Federal Candidate	Support Office	ice Sought: House District:
Mike Lee	Oppose	President State: UT
Calendar Year-To-Date Per Election for Office Sought	302.70 Disl 201	
		Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	·····	58.50
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	<b>•</b>	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		•
Paul Kilgore [Electroni	ically Filed] Date	03 17 2015
Signature	_	

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund		C C00448696
		C C00446090
Check if 24-hour report X 48-hour report New report	Amends report filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		Date of Public Distribution/Dissemination
Senate Conservatives Fund		02 28 2015
Mailing Address PO Box 388		Amount
City State Zip 0	Code	819.20
	13-0388	Transaction ID : E492900BA15BB408898A Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Online Processing  Cat	regory/ Type	02 28 7 2015
Name of Federal Candidate	Support Office S	Sought: House District:
Mike Lee	Oppose F	President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	1.90 Disburs 2016	ement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Senate Conservatives Fund		03 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388		Amount
City State Zip	Code	84.00
	13-0388 <b>T</b>	ransaction ID : E255BF194562C4B17A09 Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Online Processing  Cat	regory/ Type	03 / 07 / 2015
Name of Federal Candidate	Support Office	Sought: House District:
Mike Lee	Oppose F	President X Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	1205.90 Disburs 2016	sement For: X Primary General  Other (specify) ▶
	-	
(a) SUBTOTAL of Itemized Independent Expenditures	·····	903.20
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures	· [	
Under penalty of perjury I certify that the independent expenditures repowith, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.		•
Paul Kilgore[Electronically	Filed] Date 03	17 2015
Signature		

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund		C C00448696
		0 000440000
Check if 24-hour report X 48-hour report New report	Amends report filed or	n M = M / D = D / Y = Y = Y
Full Name of Payee	Г	Date of Public Distribution/Dissemination
Senate Conservatives Fund		03 14 2015
Mailing Address PO Box 388	-	Amount
City State Zip	Code	99.50
	13-0388 <b>T</b>	Fransaction ID : EC465EE6E5BF24F30A2C Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Online Processing  Ca	tegory/ Type	03 14 2015
Name of Federal Candidate	Support Office S	Sought: House District:
Mike Lee	Oppose P	resident State: UT
Calendar Year-To-Date Per Election for Office Sought	Disburse 2016	ement For:
Full Name of Payee Envision Printers/Marketing		Date of Public Distribution/Dissemination
Mailing Address		03 16 2015
Mailing Address 2 Riverbend Pkwy	,	Amount
City State Zip	Code	23073.48
		ransaction ID : EBCC97EC106474F959F9 Date of Disbursement or Obligation
Purpose of Expenditure IE-Lee-Direct Mail Production	tegory/ Type	03 / 16 / Y Y Y Y
Name of Federal Candidate	X Support Office S	Sought: House District:
Mike Lee	Oppose P	President State: UT State:
Calendar Year-To-Date Per Election for Office Sought	Disburs 2016	ement For:
( ) QUETOTAL ( )		
(a) SUBTOTAL of Itemized Independent Expenditures		23172.98
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	· [	24378.88
Under penalty of perjury I certify that the independent expenditures repo with, or at the request or suggestion of, any candidate or authorized com- party committee) any political party committee or its agent.		
Paul Kilgore [Electronically	Filed] Date 03	17 2015
Signature		